



Daily Security Report

Client No. 2036		Client Name OH MATERIALS				Location 1002 OSWEGO ST UTICA NY		Date 7/31/87	
Facility Equipment	Detax Clock	Weapon No.	Holster	Nightstick	Raincoat	Flashlight	Other		
Officers: Fully explain all items marked "Yes" with time and all detail. For additional space use reverse side and attach incident reports.		Officer—Day Shift (Name) Kenneth Kalif				Officer—Swing Shift (Name) GEORGE, JOHN D		Officer—Grave Shift (Name) Dick Hakoski	
Shift		Began		Ended		Shift		Began	
Observations or actions taken		Yes	No	Explanation		Yes	No	Explanation	
Rounds or stations missed			✓				✓		
Unlocked doors, gates or windows			✓				✓		
Unlocked vaults or safes			✓				✓		
Fire-smoke-or hazards			✓				✓		
1. Extinguishers missing or defective			✓				✓		
2. Sprinkler system defective			✓				✓		
3. Fire doors or exits blocked			✓				✓		
4. Rubbish accumulation			✓				✓		
5. Motors running			✓				✓		
6. Lights left burning			✓			✓	TURNED ON NITE LITE 2100		
Injury hazards			✓				✓		
Visitors		OHM & EPA people on site						OHM & EPA PEOPLE	
Trespassing			✓				✓	ON SITE	
Violation of company rules			✓				✓		
Remarks 0853 - Stearns Ferry in (0855 Fed Exp out) (0925 - Cadby Subur. gas in) (0932 - Subur. gas out) (1112 Church Ferry Civil Defense) (1117 - Church Ferry left) (1150 into Valley water) (1155 2 S-J truck on site) (1208 R.R. Mt. Valley on) (1315 two S-J trucks out) (1412 J.A. UPS) (1416 UPS out)									
IMPORTANT: If you were ill or injured please explain on the reverse side of this form and call your supervisor before leaving this post.									
1. Were you injured during this tour?		Day Shift		1.		2.		3.	
		Yes	No	Yes	No	Yes	No	Yes	No
2. Did you suffer any illness?		Yes	No	Yes	No	Yes	No	Yes	No
3. Have you reported all accidents coming to your attention?		Yes	No	Yes	No	Yes	No	Yes	No
Signatures		Day Shift		Swing Shift		Grave Shift			
1		Kenneth Kalif		John D. George		Dick Hakoski			
2									
3									

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